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UTILITY PATENT APPLICATION TRANSMITTAL

(For new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. **1103.40051X00**

First Inventor **Glenn E. Riggs et al.**

Title **TRANSPRT LOGISTICS SYSTEMS AND METHODS**

Express Mail Label No. **10/12/01 91530**

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

- Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
- Applicant claims small entity status.
See 37 CFR 1.27.
- Specification [Total Pages **42**]
(preferred arrangement set forth below)
 - Descriptive title of the invention
 - Cross Reference to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings *(if filed)*
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
- Drawing(s) (35 U.S.C. 113) [Total Sheets **13**]
- Oath or Declaration [Total Pages]
- a. Newly executed (original or copy)
 Copy from a prior application (37 CFR 1.63 (d))
(for continuation/divisional with Box 17 completed)
- i. **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b)
- Application Data Sheet. See 37 CFR 1.76

ADDRESS TO: Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission *(if applicable, all necessary)*
 - a. Computer Readable Form (CRF)
 - b. Specification Sequence Listing on:
 - i. CD-ROM or CD-R (2 copies); or
 - ii. paper
 - c. Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

9. Assignment Papers (cover sheet & document(s))
10. 37 CFR 3.73(b) Statement Power of *(when there is an assignee)* Attorney
11. English Translation Document *(if applicable)*
12. Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS Citations
13. Preliminary Amendment
14. Return Receipt Postcard (MPEP 503) *(Should be specifically itemized)*
15. Certified Copy of Priority Document(s) *(if foreign priority is claimed)*
16. Other:

17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

Continuation Divisional Continuation-in-part (CIP)

of prior application No. **60,221,541**

Prior application information: Examiner _____

Group / Art Unit _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

18. CORRESPONDENCE ADDRESS

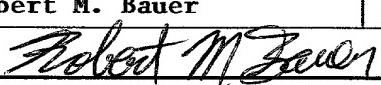
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| | | | |
|-------------------|---|-----------------------------------|----------------------|
| Name (Print/Type) | Robert M. Bauer | Registration No. (Attorney/Agent) | 34,487 |
| Signature |  | Date | July 27, 2001 |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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FEE TRANSMITTAL

for FY 2001

Patent fees are subject to annual revision

TOTAL AMOUNT OF PAYMENT (\$) **1,160.00**

Complete if Known

| | |
|----------------------|------------------------------|
| Application Number | <u>Not yet assigned</u> |
| Filing Date | <u>July 27, 2001</u> |
| First Named Inventor | <u>Glenn E. RIGGS et al.</u> |
| Examiner Name | |
| Group Art Unit | |
| Attorney Docket No. | <u>1103.40051X00</u> |

METHOD OF PAYMENT

- 1.** The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

01-2135

Deposit
Account
Name **Antonelli, Terry, Stout &
Kraus, LLP**

Charge Any Additional Fee Required
Under 37 CFR 1.16 and 1.17

Applicant claims small entity status
See 37 CFR 1.27

Payment Enclosed:
 Check Credit card Money
Order Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Small Entity

| Fee Code | Fee (\$) | Fee Code | Fee (\$) | Fee Description | Fees Paid |
|----------|----------|----------|----------|------------------------|-----------|
| 101 | 710 | 201 | 355 | Utility filing fee | \$710.00 |
| 106 | 320 | 206 | 160 | Design filing fee | |
| 107 | 490 | 207 | 245 | Plant filing fee | |
| 108 | 710 | 208 | 355 | Reissue filing fee | |
| 114 | 150 | 214 | 75 | Provisional filing fee | |

SUBTOTAL (1) (\$) **710.00**

2. EXTRA CLAIM FEES

| | Extra Claims | Fee from below | Fee Paid |
|-----------------------|--------------|----------------|----------------|
| Total Claims | 45 | -20** = 25 | x 18 = \$450.0 |
| Independent Claims | 3 | - 3** = 0 | x 80 = 0 |
| Multiple Dependent | | | = |

Large Entity Small Entity

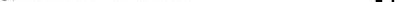
| Fee Code | Fee (\$) | Fee Code | Fee (\$) | Fee Description |
|-----------------|-----------------|-----------------|-----------------|--|
| 103 | 18 | 203 | 9 | Claims in excess of 20 |
| 102 | 80 | 202 | 40 | Independent claims in excess of 3 |
| 104 | 270 | 204 | 135 | Multiple dependent claim, if not paid |
| 109 | 80 | 209 | 40 | ** Reissue independent claims over original patent |
| 110 | 18 | 210 | 9 | ** Reissue claims in excess of 20 and over original patent |

SUBTOTAL (2)

(\\$)450.00

*or number previously paid, if greater. For Reissues, see above

SUBMITTED BY

| | | | | | |
|-------------------|---|-------------------------------------|--------|-----------|--------------|
| Name (Print/Type) | Robert M. Bauer | Registration No (Attorney/Agent) | 34,487 | Telephone | 703-312-6600 |
| Signature |  | | | Date | |

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